File with: owa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form OMMITTEE NAME (Must be same as on Statement of Organization) homsen for Supervisor **FORM** APORTANT: Indicate by # type of committee you are reporting for: DR-2 DISCLOSURE 1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party (Rev. 12/2009) REPORT 4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political ubdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (For Office Use Only 1) Local Ballot Issue Comm. # ___ ANDIDATE COMMITTEES ONLY: Logged in andidate Name Political Party (if applicable) Linda K. Thomsen Scanned ___ Democratic Computer ffice Sought District (if Senate or House) Audited Supervisor e reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a ndidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. October 19, 2010 M FILING A REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate by # 1 CHECK IF AMENDMENT TO REPORT DATED ____ Local Committees, enter Date of Election November 2, 2010 Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held Jones STATEMENT OF CASH ON HAND ISH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$ 681 85 ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 850.00 Schedule F: Loans Received total (Attach Schedule F)..... 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... 0.00 (Schedule H applies to Candidates' Committees Only) 1,531.85 SUB-TOTAL.....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...... 1,183.69 Schedule F: Loan Repayments total (Attach Schedule F)..... 0.00 \SH ON HAND at the end of this reporting period (if final report balance must be zero)\$ 348.16 JNPAID BILLS (From Schedule D - Attach Schedule D).....\$ 400.00 I KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ _39.00 DUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 0.00 **)NSULTANT BREAKDOWN (Schedule G Attached?)** YES _ NO INDIDATE COMMITTEES ONLY: ILUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) 0.00 ATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

(indu	TIONS MONEY TA	unds)	Reset Form	(Rev.	MONE	TARY EIPTS
COMMITTEE Thomsen for	NAME (Must be same or Supervisor	e as on Statement of Organization)			CHECK THIS AMENDING FO	BOX IF
TATE CANDID MBER AND TH SCLOSURE BO OTE: ANY PE ESPONSIBILITION: Se	ATES NOTE: IF A CONTRE HE PAC CHECK NUMBER IN DARD. RSON, OTHER THAN AN TIES AND SHOULD IMMI	RIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL A I THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS IN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$1 EDIATELY CONTACT THE BOARD. Dits the use of information copied from reports and ser than statutory political committees.	750 TO YOUR CAN	IPAIGN M	AY HAVE FILING	AIGN B
DATE RECEIVED MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATION TO CANI	DIDATE*	AMOUNT RECEIVED	√ IF FUN RAIS
/19/10	ID# _{N/A} CK# _{N/A}	Paul T. Thomsen 10700 - 223rd Avenue Anamosa, IA 52205	Spouse		\$750.00	INCO
/31/10	ID# N/A CK# N/A	Gary L. Hart 12318 Madison Road Center Junction, IA 52212	None		100.00	
	CK#					
	ID# CK#					
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	CK#					
	ID# CK#					
	I	TOTAL (if last p	SUB-TOT/	edule)	\$ 850.00 \$ 850.00	

or instructions, See Back of Form

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

ETHICS & CAMPAIGN DISCLOSURE BOARD.	AMENDING FORM
COMMITTEE NAME (Must be same as on Statement of Organization)	
Thomsen for Supervisor	

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	NUMBER			
07/19/10	ID# _{N/A} CK#1503	Victorystore.com 500 SW 30th Street Davenport, IA 52802	Credit card payment for 100 - 18" x 24" yard signs with mounting frames and 25 - 4' x 4' campaign signs	\$ 702.19
08/02/10	ID# _{N/A} CK# ₁₅₀₄	Monticello Express 111 E Grand St., PO Box 191 Monticello, IA 52310	3,000 campaign brochures for distribution at parades and door-to-door campaigning	481.50
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	СК#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 1.102.00

SUB-TOTAL \$ 1,183.69

TOTAL (if last page of this schedule) \$ 1,183.69

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page	1	of	1	

ONTHON	HUND, DEE BAUK OF FUNNI		
COMMITTEE Thomsen for	NAME (Must be same as on Statement of Organization) or Supervisor		D INCURRED v. 08/98) INDEBTEDNESS
NOTE: Debts Sched	previously reported that remain unpaid must be included on this dule, as well as any new obligations incurred in this period.	Reset Form	CHECK THIS BOX IF AMENDING FORM
DEBTS/OB (DO NOT II	BLIGATIONS REMAINING THIS REPORTING PERI NCLUDE LOANS SHOW LOANS ON SCHEDULE	E F) received the second of th	ncurred debt* is a debt for sor services ordered or red, but not paid for by the ff the reporting period., dless of whether an invoice een received.
INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/01/10	Midland Times 301 W. Webster Street Wyoming, IA 52362	Estimated Cost - Weekly newspaper campaign ad	50.00
0/07/10	Monticello Express 111 E. Grand Street, PO Box 191 Monticello, IA 52310	Estimated Cost - Weekly campaign ad in the Anamosa, Cascade and Monticello papers	150.00
10/08/10	Midland Times 301 W. Webster Street Wyoming, IA 52362	Estimated Cost - Weekly newspaper campaign ad	50.00
0/14/10	Monticello Express 111 E. Grand Street, PO Box 191 Monticello, IA 52310	Estimated Cost - Weekly campaign ad in the Anamosa, Cascade and Monticello papers	150.00
		SUB-TOTAL	400.00
	TOTAL DEBTS OWED BY COMMITTEE AT 1	THE END OF THIS REPORTING PERIOD	\$ 400.00

'If actual figure is unknown, show "estimated" beside the figure.

of (for Schedule D)

ANDIDATE COMMITTEES NOTE:
ncurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or ganizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

COMMITTEE NAME (Must be same as on Statement of Organization) Thomsen for Supervisor				SCHEDULE E IN-KIND (Rev. 06/97) CONTRIBUTIONS		
			Reset Form		CHECK THIS BOX IF AMENDING FORM	
DATE RECEIVED MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET	√ IF FOR FUND-RAISER	
)9/1 7 /10	Thomsen Brothers Farm 10700 - 223rd Avenue	Brother-in-law	Rental of 18 steel	\$ 18.00	CONTRIBUTION	

DATE RECEIVED MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER
)9/17/10	Thomsen Brothers Farm 10700 - 223rd Avenue Anamosa, IA 52205	Brother-in-law & Spouse	Rental of 18 steel posts to mount 4' x 4' campaign signs	\$ 18.00	CONTRIBUTION
9/27/10	Olin Consolidated School District 212 Trilby Street Olin, IA 52320	None	Poster paper and lamination	1.00	
9/27/10	Carrie Fortin 200 Trilby Street Olin, IA 52320	None	Creation of campaign poster	20.00	
			·		
				·	
			SUB-TOTAL	\$ 39.00	
			TOTAL (if last page of this schedule)	39.00	

Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)